									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003  10762209													
CLAIMS AS FILED - PART I SMALL ENTITY OTHER TO													
TC	TAL CLAIMS		22					RATE	· FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	€ 385.00	ОЯ	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			23 minus 20=		· 2:			X\$ 9=	1800	OR	XS18= -		
INDEPENDENT CLAIMS			/ minus 3 =		•			X43=	1	OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0"						olumn 2		TOTAL	4/1300	OR	TOTAL		
												THAN	
5/9/05 CLAIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY OR SMALL ENTITY													
A		CLAIMS REMAINING		HIGH NUM PREVE	EST BER	PRESENT		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
AMENDMENT A		AFTER AMENDMENT		PAID		EXTRA			FEE			FEE	
	Total	. 23	Minus	- 3	15	= /		X\$ 9=	25 0	OR	X\$18=		
	Independent	• /	Minus	***	3	• -		X43=	<b></b> .	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT			CLAIM		j	1145-			+290=			
TOTAL TOTAL													
•	ADDIT. FEE												
		(Column 1)		(Colu	mn 2)	(Column 3)	<b>ት</b> ፣		ADDI-	1		ADDI-	
MENOMENT B	٠	REMAINING AFTER AMENDMENT		NUN PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Treal	•	Minus	••		*	]	XS 9=		OŘ	XS18=		
	Independent	•	Minus '	•••		<u> -</u>	]	X43=		OR	X86≃		
₹.	FIRST PRESENTATION OF MULTIPLE DEPENDENT				T CLAIM		ل	-145=		OR	+290=	÷	
CTAL										OR	TOTAL		
भ्रतार.										יייינ	ADDIT. FEE		
		(Column 1)	,		mr 21	Cctumn 3	7		1			ADDI-	
NTC		CLAIMS REMAINING AFTER AMENDMENT		NUL PREVI	Hest Mber Hously Degr	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE	
AMENOMENT C	Total	•	Minus"	-		a .		XS 9=		OR	XS18=		
	Independent		Minus	•		•		X43=	1	OR	X86=		
ৰ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<b></b> -	<del> </del>	1	200		
	-	•						+145=		OR	+290=		
"If the entry in column I is less than the entry in column 2, write "0" in culumn 3 TOTAL  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE  ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 onler "2."										OR	ADDIT FEE		
***	II the Highest Nu The Highest Nun	mber Previously Pal ther Previously Pal	ad For IN TH a For (Total o	IIS SPACE or Indepen	is loss th denti is th	an 3 caler "3" e highest numi	bei to			or we c	munin 1	•	

FORM PTOLETS (Par 1003)

CONTRACT TO SERVICE U.S. DEPARTMENT OF COMMERC